

Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

UNITED STATES DISTRICT COURT

for the District of Division

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Case No.

(to be filled in by the Clerk's Office)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

Pro Se 14 (Rev. 12/16) Complaint for	Violation of Civil	Rights (Prisoner)

I. The Parties to This Complaint

A. The Plaintiff(s)

B.

Provide the information below for needed.	each plaintiff named in the complaint. Attach additional pages if	f
Name	RALHOND DNDRE DOWDELL	
All other names by which	TATMO DO PEDIOC GOLDON	
you have been known:	RAYMOND ANDRE DOWDELL	
ID Number	0141773	
Current Institution	HARRIS COUNTY JAIL	_
Address	1200 RAKER St. 6HZ	_
	Houston Tx 77002	
	City State Zip Code	
The Defendant(s)		
listed below are identical to those the person's job or title (if known) as individual capacity or official capa	an organization, or a corporation. Make sure that the defendant(s) contained in the above caption. For an individual defendant, included check whether you are bringing this complaint against them in acity, or both. Attach additional pages if needed.	ude
Defendant No. 1		
Name	Robert Johnson	
Job or Title (if known)	SUDGE/ EX Atty	
Shield Number	-1 0 1	
Employer	HARRIS County	
Address		
	$\frac{1}{1}$ City $\frac{1}{1}$	
	Individual capacity M Official capacity	
Defendant No. 2		
Name		
Job or Title (if known)		
Shield Number		
Employer		
Address		
•	City State Zip Code	
	Individual capacity Official capacity	

		Defendant No. 3	
		Name	
		Job or Title (if known)	
		Shield Number	
		Employer	
		Address	
			City State Zip Code
			Individual capacity Official capacity
		Defendant No. 4	
		Name	
		Job or Title (if known)	
		Shield Number	
		Employer	
		Address	
			City State Zip Code
			Individual capacity Official capacity
II.	Basis	for Jurisdiction	
	immu <i>Feder</i>	mities secured by the Constitution a	tte or local officials for the "deprivation of any rights, privileges, or nd [federal laws]." Under <i>Bivens v. Six Unknown Named Agents of 88 (1971)</i> , you may sue federal officials for the violation of certain
	A.	Are you bringing suit against (che	eck all that apply):
		Federal officials (a Bivens c	laim)
		State or local officials (a § 1	983 claim)
	В.	the Constitution and [federal laws	ing the "deprivation of any rights, privileges, or immunities secured by s]." 42 U.S.C. § 1983. If you are suing under section 1983, what right(s) do you claim is/are being violated by state or local officials?
		WRONGFUL CO	muchon
	C.		only recover for the violation of certain constitutional rights. If you stitutional right(s) do you claim is/are being violated by federal

ro Se	14 (Rev. 12	/16) Complaint for Violation of Civil Rights (Prisoner)
•		
	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
I.	Dwine	ner Status
l•		
	Indica	tte whether you are a prisoner or other confined person as follows (check all that apply): Pretrial detainee
		Civilly committed detainee
		Immigration detainee
		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
	\square	Other (explain) CONVICTED & SENTENCED TO AdjucATED ProbATION
	Statem	nent of Claim
	alleged further any car	s briefly as possible the facts of your case. Describe how each defendant was personally involved in the l wrongful action, along with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cite ses or statutes. If more than one claim is asserted, number each claim and write a short and plain ent of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.
		Court 177 09-25-17
	В.	If the events giving rise to your claim arose in an institution, describe where and when they arose.
	C 7h	DURING COURT PROCEEDINGS I ASKED MY AHY WAS IT A COND FINTERST FOR DUGE ROBERT JOHNSON to KNIF ON MY PROBATION CASEE, ough I filed AGRIEVANCE ON HIM WITH the STATE BAR. Page 4 of 11

C. What date and approximate time did the events giving rise to your claim(s) occur?

Ot-25-17 approx. 2:15 pm

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

An Atty of whom I didn't sign to Represent Mr. (See Attaches)

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

MA

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

OVERTURN MY Entire CASE, I. 5 million for damages and LOST WARES. REASON FOR THESE CLAIMS: VIOLATION of my Rights AS A U.S. CITIZEN

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes
	NO OUT ON BOND.
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
В.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes .
	☐ No
	Do not know
С.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	Yes
	No No
	Do not know
	If yes, which claim(s)?

Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?
	Yes
	No NA
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
	Yes
	M No WA
E.	If you did file a grievance:
	1. Where did you file the grievance?
	WITH The STATE BAR ASSOCIATION
	2. What did you claim in your grievance?
	IN EFFECTUAL COUNSE.
	3. What was the result, if any?
	Told to go to ARBITRIATION
	4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

SENT A LETTER TO STATE BAR SEEKING WHERE TO FILE FOR ARBITRATION FOR the SECOND TIME WHEN I didn't RECEIVE AN ANSWEAR

. (107. 12/	To Company to Trouble of The Adjus (Thorner)
F.	If you did not file a grievance:
	1. If there are any reasons why you did not file a grievance, state them here:
	NA
	 If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
G.	TINFORMED THE Afty ON MY CASE AND THE COURT PROBATION OFFICIAL SIGNED UNDER DURESS. Please set forth any additional information that is relevant to the exhaustion of your administrative
G.	remedies.
	•
	(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)
Previo	us Lawsuits
the filing brough malicion	nree strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying ng fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, t an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, ous, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent of serious physical injury." 28 U.S.C. § 1915(g).
To the	best of your knowledge, have you had a case dismissed based on this "three strikes rule"?
Ye	es •
No.	0
If yes,	state which court dismissed your case, when this occurred, and attach a copy of the order if possible.
NI	, A
t	·

VIII.

Pro Se 14 (Rev. 12/	16) Complaint for Violation of Civil Rights (Prisoner)		
A.	Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?		
	Yes		
	No ·		
В.	If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)		
	1. Parties to the previous lawsuit		
	Plaintiff(s)		
	Defendant(s)		
	2. Court (if federal court, name the district; if state court, name the county and State)		
	3. Docket or index number		
	4. Name of Judge assigned to your case		
	5. Approximate date of filing lawsuit		
	6. Is the case still pending?		
	\ 		
	X Yes		
	No		
	If no, give the approximate date of disposition.		
	7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)		
	STILL PENDING		
C.	Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your		

imprisonment?

Page 9 of 11

Pro Se 14 (Rev. 12/1	6) Complaint for Violation of Civil Rights (Prisoner)
,	Yes
•	₩ No
D.	If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1. Parties to the previous lawsuit Plaintiff(s) Defendant(s)
	2. Court (if federal court, name the district; if state court, name the county and State)
	3. Docket or index number
	4. Name of Judge assigned to your case
	5. Approximate date of filing lawsuit
	6. Is the case still pending? Yes No
	If no, give the approximate date of disposition
	7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
	STILL PENDING.

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing:	6/17		
	Signature of Plaintiff	Laamond Word	<u>D_</u>	
1011	Printed Name of Plaintiff	RAMONDY. Downell		
HLJANL	Prison Identification #	01141773	_,	
	Prison Address	1200 BAKEL ST 6+	12_	
		Houston	Tx_	77002
		City	State	Zip Code
В.	For Attorneys			
e _c	Date of signing:	<u>. </u>		· ·
	Signature of Attorney			
	Printed Name of Attorney			
	Bar Number			
	Name of Law Firm			
	Address			
		City	State	Zip Code
	Telephone Number			
	E-mail Address			

	To: Whom it may consider
	Exhibit(1) and Exhibit(2), is the evidence that
	is very helpful in the conflict of interest complainty
	and Weary ConnerNa semist, Judge /Extanger
	Robert Johnson Harring an open case regimen Judge/
	Ex Lawyer Robert Johnson, should have prevented
	any judgement or ruling in my case. This conflict
	of outerest, has prevented me, from continuing on
	with my life, and Teying to get my family back.
	Things were added to the paper work, Terms were
	violated that were already discussed between, Myself
	and probation officer Trina Sikes-Hoskins. The
	TORMS were to MEET OR COMPLETE WHEN I finished
	After-Care There is no Reason, that Judge/Ex
	Lawyer Robert Johnson should have EVEN DEEN NEAR
,	This Case, unless haven was NEAUT TO be coused
	Please consider the Evidence that has been presented
	in my be-bolf. The conflict of Threpest has delivered
	is Wrongful Conviction
, And the second	Kespectully, 1611
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				STRICT		•
and that on the final hearing a	an adjudication of g	guilt be entered.	ASSISTANT DI ATTORNEY HARRIS COUN by ORDERED to	STRICT		st of the
and that on the final hearing a MOTION GRANTED AS P Defendant and that a copy of	RAYED FOR and	guilt be entered. the clelly is here	ASSISTANT DI ATTORNEY HARRIS COUN by ORDERED to	STRICT	apias for arres	st of the
and that on the final hearing a	RAYED FOR and	guilt be entered. the clelly is here	ASSISTANT DI ATTORNEY HARRIS COUN by ORDERED to	STRICT	apias for arres	st of the
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Extrapo 471 (-cy-03058 Document (1 Fild ope 10/11/17 in Jose Crage 40 of 15

MOTION TO ADJUDICATE GUILT Pagai Not Judge / Ex Lawyer Robert Johnson)

CAUSE NO.

1484047

RAAMOND DOWDELL

PAGE 3 MOTION TO ADJUDICATE GUILT

THE STATE OF TEXAS VS.

Exhibit (2) Licence In Case Against Judge Ex Lawyer Kobert Johnson

I understand that under the laws of this State, the Court shall determine the terms and conditions of Community Supervision, and may alter or modify said conditions during the period of Community Supervision. I further understand that failure to abide by these Conditions of Community Supervision may result in the revocation of Community Supervision or an adjudication of guilt.

I have read or had read to me by the CLO/CSO Officer the conditions the Judge has added or changed, and I have initialed each change indicating that I understand the modifications. I also understand that if I do not accept these changes to my Conditions of Community Supervision, I must make a timely and specific objection and request to appear before the Judge. I understand that if I refuse to accept these amendments, the Judge may issue a warrant for my arrest and I have a right to be represented by counsel. If I am indigent, the Court shall appoint counsel for me. I also understand that I may voluntarily and knowingly accept this modification.

Community Supervision expires the 4th day of November , 2021



Acceptance and Waiver

FOR: Raamond Dowdell

I understand the terms and consequences for failing to comply with these Conditions of Community Supervision and I knowingly and voluntarily agree to this modification of my conditions. I further understand that by signing these conditions I am affirmatively accepting the terms and I waive any right to object or be represented by counsel.

Objection and Request for Immediate Hearing

I object to this modification of my conditions of Community Supervision and request an immediate hearing before the Judge.

Raamond Dowdell

September 25, 2017

SPN: 01141773 CAUSE: 14840470

Date

Defendant

Signed this 25th

__{day of} September

2017

.

X_

Robert Johnson

Judge Presiding

Tanika Moore

CLO / CSO Officer

Defendant's Right Thumbprint

Amended to add participation in SAFPF Relapse and change begin dates for fee payment. **Release to SAFPF Staff ONLY**